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Big Pharma's Takeover of Modern Medicine Created a 'Pandemic of Misinformed Doctors'

Cardiologist Dr. Aseem Malhotra shares data on the Big Pharma takeover of modern medicine and explains how it's led to "a pandemic" of misinformed doctors who unwittingly harm and misinform their patients.

By **Dr. Joseph Mercola**

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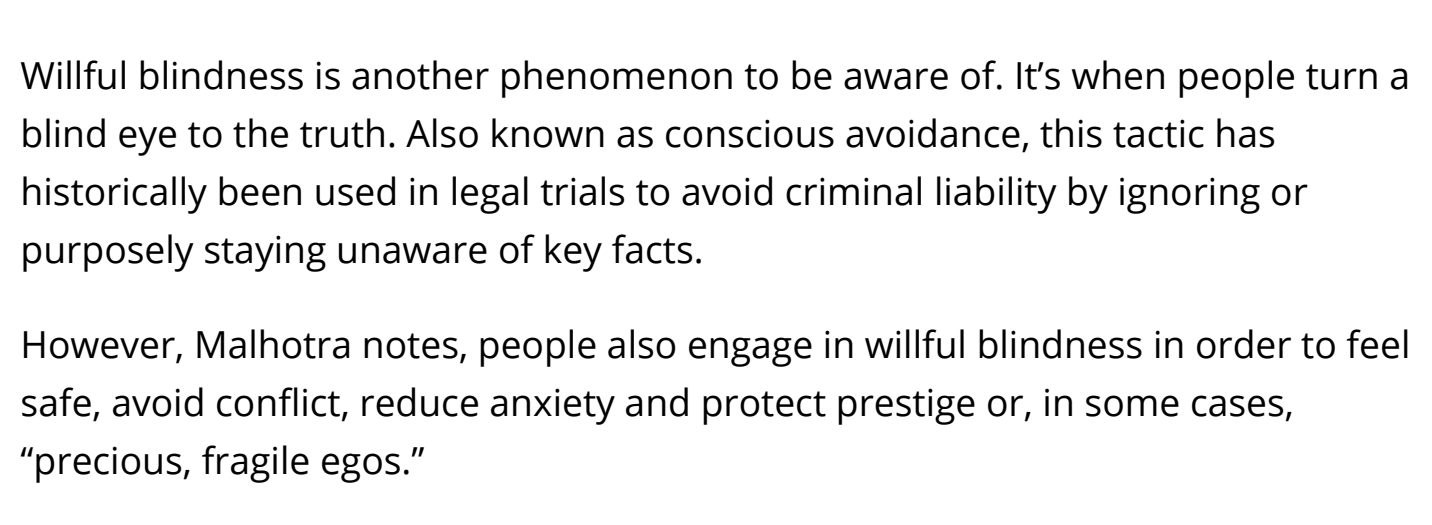
Story at a glance:

- Cardiologist Dr. Aseem Malhotra shares data on the Big Pharma takeover of modern medicine.
- Due to Big Pharma's stronghold over healthcare, we're facing what Malhotra calls a pandemic of misinformed doctors and unwittingly harmed and misinformed patients.
- Drug companies and medical device manufacturers aren't in business to make patients happy; they're beholden to their shareholders, for whom they have a financial obligation to produce a profit.
- Malhotra shares data showing why he believes COVID-19 shots should be suspended.
- Malhotra notes that political involvement and policy advocacy, combined with social participation and social movements, can together lead to the creation of relevant knowledge to protect public health.

Fear inhibits your ability to think critically. This is a central point made by cardiologist Dr. Aseem Malhotra in his London presentation on Nov. 14 (see video below). Many people were gripped by unprecedented fear during the COVID-19 pandemic, which shaped attitudes about the pharmacological interventions offered.

Willful blindness is another phenomenon to be aware of. It's when people turn a blind eye to the truth. Also known as conscious avoidance, this tactic has historically been used in legal trials to avoid criminal liability by ignoring or purposely staying unaware of key facts.

However, Malhotra notes, people also engage in willful blindness in order to feel safe, avoid conflict, reduce anxiety and protect prestige or, in some cases, "precious, fragile egos."



The illusion of knowledge is worse than ignorance

Malhotra quoted the late Stephen Hawking, who stated, "The greatest enemy of knowledge is not ignorance, it is the illusion of knowledge."

In terms of healthcare, evidence-based medicine has been hijacked by Big Pharma; it's now an illusion.

There's also an illusion that we're at the forefront of medicine with prestigious organizations leading the helm, when in reality multiple health crises are upon us.

The World Health Organization's (WHO) definition of health is a "state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."

Public health, too, is not only about preventing disease, but also promoting health and prolonging life, while helping populations reach the highest possible level of well-being. But are public health agencies actually helping to achieve these goals?

Malhotra, a cardiologist trained by the U.K.'s National Health Service (NHS), as well as a visiting professor of evidence-based medicine at Bahiana School of Medicine and Public Health in Salvador, Brazil, cited a 2020 study published in the British Medical Bulletin.

It used data from the U.K.'s Office for National Statistics from 2010 to 2020, which showed a "dramatic slowdown in life expectancy and diverging trends in infant mortality in the UK as a whole and England and Wales, respectively." Health trends in the U.K., the study concluded, "are worrying and raise important questions about government policies."

Throughout his career, Malhotra has tried to call attention to failures in treating heart disease. "Despite so-called modern science," heart disease remains the No. 1 cause of death globally. "So clearly there's something that we've done wrong on that front," Malhotra said.

More recently, he's focused on using real evidence-based medicine to share the truth about COVID-19 mRNA vaccines. His two-part paper on the topic was published in the Journal of Insulin Resistance, specifically, because this journal does not accept money from the pharmaceutical industry.

A pandemic of misinformed doctors and patients

Due to Big Pharma's stronghold over health care, we're facing what Malhotra calls a pandemic of misinformed doctors and unwittingly harmed and misinformed patients. This misinformation comes from a variety of sources, including:

- Biased funding of research — Research is funded because it's likely to be profitable, not because it's likely to be better for patients.
- Biased reporting in medical journals.
- Biased patient pamphlets.
- Biased reporting in the media.
- Commercial conflicts of interest.
- Defensive medicine.
- Medical curricula that fail to teach doctors how to comprehend and communicate health statistics.

Malhotra describes John Ioannidis, professor of medicine and professor of epidemiology and population health at Stanford University, as the "Stephen Hawking of medicine." Ioannidis co-wrote a paper in 2017 titled, "How to Survive the Medical Misinformation Mess."

At the time, he described four key problems:

1. Much published research is unreliable, offers no benefit to patients or is not useful to decision-makers.
2. Most healthcare professionals are not aware of this problem with published research.
3. Healthcare professionals lack the necessary skills to evaluate the reliability of medical evidence.
4. Patients and families lack accurate medical evidence and skilled guidance when they need to make medical decisions.

The solution, according to Ioannidis, involves focusing efforts on "making health care professionals more sensitive to the limitations of the evidence, training them to do critical appraisal, and enhancing their communication skills so that they can effectively summarize and discuss medical evidence with patients to improve decision-making."

Ioannidis also wrote a 2005 paper about why most published research findings are false. Not surprisingly, one factor that makes a research finding less likely to be true is "greater financial and other interest and prejudice."

Drug companies are beholden to their shareholders

Drug companies and medical device manufacturers aren't in business to make patients happy; they're beholden to their shareholders, for whom they have a financial obligation to produce a profit.

There's no legal requirement for them to offer patients the "best" treatment. Further, regulators regularly fail at their duty to prevent industry misconduct, while doctors and medical journals — which do have a responsibility to put patients' interests and scientific integrity first — collude with the industry for financial gain.

Recently, Malhotra was heavily involved in campaigning to end NHS COVID-19 shot mandates. But prior to this, he spoke to the European Parliament in 2018 to warn them of the epidemic of misinformed doctors and patients, stating, "Honest doctors can no longer practice honest medicine. We have a complete health care system failure … "

In fact, in 2016, Dr. Peter C. Gotzsche, co-founder of the Cochrane Collaboration and the Institute for Scientific Freedom, stated prescription drugs are the third leading cause of death — most of them preventable.

"The reason for that," Malhotra said, "is the information that comes from drug companies — essentially the results of clinical trials — exaggerate the benefits and the safety of the drugs."

Corporate crime and fraud are also rampant — from 2009 to 2014, Gotzsche noted that most of the top 10 drug companies committed fraud, totaling about $14 billion, including hiding data on drug harms and illegally marketing drugs.

Yet, the fines the drug companies had to pay for their crimes were minuscule in comparison to the profits they made from the drugs. Since then, however, nobody was fired, and "nothing has changed to stop them from committing these crimes again."

Tobacco tactics revisited during COVID pandemic

Malhotra is among those who early on during the pandemic said that poor diet can increase your risk of dying from COVID-19, by increasing obesity risk, chronic disease and disrupting your gut microbiome.

In April 2020, he tweeted, "The government and public health England are ignorant and grossly negligent for not telling the public they need to change their diet now."

Not only did they not publicly share the importance of healthy weight and diet to ward off COVID-19, but they glamorized and encouraged junk food consumption via their official social media channels. At one point during the pandemic, Royal Free Hospital, which is part of the Royal Free London NHS Foundation Trust, tweeted the following along with a photo showing dozens of doughnut boxes:

> "You guys at @krispykremeUK Enfield sure know how to put a smile on our staff's faces!1,500 doughnuts delivered to our staff at Barnet Hospital-#glazeamaze."

"I've got nothing against people having a treat," Malhotra said. "But hospitals shouldn't be promoting … and essentially advertising the fact that we are giving 1,000 free Krispy Kreme doughnuts to nurses in the middle of the pandemic. I don't think that was very productive considering what we know about the influence on COVID."

That hospitals were promoting junk food and junk food companies instead of healthy food is reminiscent of Big Tobacco's tactics, which not only suppressed the harmful effects of cigarettes but also recruited doctors to promote them, using slogans such as, "More Doctors Smoke Camels Than Any Other Cigarette."

"We see the same tactics repeating themselves," Malhotra continued. "What Krispy Kreme is doing is using the NHS as a branding opportunity for what are essentially addictive, toxic foods that should just be treats but not part of the regular diet."

How COVID shots were oversold

Malhotra was one of the first to take Pfizer's COVID-19 shot, and he's double-jabbed.

Initially, he was in favor of the shots but a study published in Circulation, which found an increased incidence of inflammatory markers linked to heart attacks in people who'd received mRNA COVID-19 shots, gave him pause.

Then, a whistleblower from a prestigious British institution contacted him and said a group of researchers had found inflammation of coronary arteries after the mRNA shot.

However, the researchers had a meeting and decided not to share their findings because it might affect their funding from the drug industry.

He then learned of data from Scotland that showed an unexplained 25% increase in heart attacks.

He went to the media, armed with data, to share his concerns in October 2021, calling for an investigation. It received a lot of attention, but Malhotra was soon targeted by anonymous complaints to a medical organization, which put his medical license at risk.

At that point, he decided to gather other experts and critically review the data — then publish the truth.

In November 2020, Pfizer claimed their COVID-19 shot was 95% effective against COVID-19, but this was highly misleading and, according to Malhotra, based on flawed methodology:

> "'Relative risk reduction is a way of exaggerating the benefits of any intervention … which would be in the interest of people trying to sell you something — in this case, the pharmaceutical industry.
>
> "So if, for example, you have 1,000 people in a trial that didn't have the vaccine versus 1,000 people that did in the placebo group … you may have two people dying. And in the intervention group, you may have just one person dying. And that's a reduction of 50%. One over two is a 50% relative risk reduction. But actually, you've only saved one life out of 1,000.
>
> "So, the absolute risk reduction is only 1 in 1,000. It's a big difference. The guidance has been for many years that we must always use absolute risk reduction in conversations with patients, not just relative risk reduction alone; otherwise, it's considered unethical,' Malhotra said.
>
> "The accusation is that governments acted on Pfizer's relative risk figure of 95% efficacy, when the absolute risk was a mere 0.84%. In other words, you'd have to vaccinate 119 people to prevent just one from catching COVID. 'So we were basically sold on something that ultimately, and in retrospect now, was very, very misleading.'"

Big Pharma provides majority of budget for leading regulators

If there were ever any doubt that regulatory agencies are captured by industry, consider that significant portions of regulatory agencies' budgets come from the pharmaceutical industry that these agencies are supposed to regulate. For instance:

- Australia's Therapeutic Goods Administration — 96% of budget derived from industry
- Europe's EMA — 89%
- U.K.'s MHRA — 86%
- Japan's Pharmaceuticals and Medical Devices Agency — 85%
- U.S. FDA — 65%
- Health Canada — 50.5%

Data and health advice from these agencies cannot be considered independent or trustworthy when it's clouded by vested interests. What did one study — conducted by people who do not take money from the drug industry — find?

It reanalyzed data that led to the original approval of the shots, and subsequent shot mandates, revealing people were more likely to suffer a serious adverse, disability, hospitalization or life-changing event after receiving an mRNA COVID-19 shot than be hospitalized with COVID-19.

Malhotra shared additional facts about COVID-19 shots that are now known based on the best available evidence:

- COVID-19 shots offer no protection against infection now.
- No reduction in COVID-19 mortality.
- Natural immunity is very protective.
- Shot side effects are nearly three times more likely if you get the shot after having COVID-19.
- Unprecedented harms have been reported from the shots.

"We have pulled vaccines in the past for much less," Malhotra said. "This vaccine needs to be suspended completely, pending an inquiry."

So why haven't you heard about this? It's clear that willful blindness has taken over. Malhotra notes that political involvement and policy advocacy, combined with social participation and social movements can together lead to the creation of relevant knowledge.

According to Malhotra:

> "We need to make sure we've got clear, relevant, concrete knowledge in a way that can be disseminated and understandable to the public."

Toward that end, Malhotra states that it's crucial for the integrity of public health for the facts to be acknowledged and for regulators to state that they've changed their minds too. Moving forward, in order to ensure access to real, evidence-based medicine, key changes need to be made, according to Malhotra, including:

- Drug industry should play no role in testing drugs.
- Drug industry should not be able to hide raw data from trials.
- All results of all trials in humans must be made publicly available.
- Regulators such as the FDA and MHRA should not get any money from the drug industry.

What can you do to help?

To help enact change, Malhotra is calling for citizen power in the U.K. to use social media, calling for the suspension of mRNA shots. Specifically, he suggests tweeting and sharing the following, which can be tweaked depending on your location:

> "My name is … and I call on the Secretary of State for Health, @SteveBarclay to #SuspendTheMRNAjabsnow until the raw data is released for independent analysis."

Further, in order to beat the psychopathic corporate tyranny that has taken over, we must act virtuously, which involves embracing the following to keep moving forward:

1. Wisdom
2. Courage
3. Moderation
4. Justice

Originally published by Mercola.

The views and opinions expressed in this article are those of the authors and do not necessarily reflect the views of Children's Health Defense.

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Dr. Joseph Mercola
Dr. Joseph Mercola is the founder of Mercola.com.

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vilamoureux
8 days ago
I would like to buy whatever Mercola is consuming that makes him think that "wisdom", "courage", "moderation", and "justice" will get us out of Big Pharma buying off our government so they can use the government's implicit threat of violence to control people into giving them money and to look the other way when they release deadly and debilitating products. These are people who have corrupted our halls of governance and intentionally released deadly and deforming products to get a couple more zeros on their ledger.
Mercola's strategy only works if your plan is to be a coward in hopes of there being an afterlife where you would be rewarded for being such. If you want to change the behavior of murderers and poisoners in this life the first step is understanding that killing and poisoning are the only languages they know.
How can one hope to change anything if they refuse speak a language the person/group they are trying to convince understands?
6 0 • Reply • Share ›

BH387 → vilamoureux
8 days ago
Are not courage and justice necessary to hold these mass murderers accountable; and are not wisdom and moderation necessary to choose one's battles wisely and enable as many of the ignorant as possible to realize what's going on? Only about 1/3 of people in the US have been "boosted", and a vast majority of parents have shunned COVID jabs for their children.

Absolutely right we cannot depend on governments that are corrupted to the core for anything. But for us to most effectively hold them and the nefarious entities they serve accountable, we better damn well act with courage, seek justice, be wise, and communicate with moderation and persuasion the gain as many allies as possible to eventually have the majority we need to overturn this disgraceful state of affairs.
2 0 • Reply • Share ›

vilamoureux → BH387
7 days ago
You cannot work within a corrupt system to fix the corrupt system.
The solution is the one given to us by our founders to deal with tyrants. The only way a representative government works for the citizenry is if the officials respect or fear their constituents.
History does a pretty good job at showing they will never respect the citizenry, that leaves only one option and that is a choice those officials made.
1 0 • Reply • Share ›

tag
8 days ago
Fear has been the driving force of the plandemic since day one. And sadly still is. One of my employees, since the word covid hit the planet said we need a vaccine, I told her flat out I wouldn't take it. Vaccines can't be developed and tested in a few months. This "disease" had a low death rate from the beginning but they unleashed the propaganda lies, videos of hospitals over ran, Ambulance staked up and suddenly EVERYONE was dying of Covid...even in traffic accidents, suicides, gunshot wounds and old age with many other health issues,, The line for that PCR test were miles long, mask mandates, any old bandanna will do, 6 ft. distance while a real virus can travel in a cough of a sneeze 30+ ft? Then came the vax. Untested, EU approved, other better protocols demonized and the fear sent the sheeple to roll up their sleeves and comply without ever even doing some simple searching...and listening to others. So fast forward to today. If any out there are not paying attention to their own local obituaries, I suggest you start. I live in a relatively small town 40,000 A year ago I started paying attention to those that die under 70 Many. Today? the new norm is those that die 50 or under and most days it is 5 or so. Many in their 20's and 30's. You can justify this, fool yourselves or just remains stupid but there is nothing normal about the increase in deaths in young people. And yet the fear campaign goes on. Get your jab, safe and effective. Yep it will safely and effectively kill you years before your time. Why aren't people afraid of that?
4 0 • Reply • Share ›

Alan Sterry → tag
6 days ago
There was a clip of a show (Colbert ??) on Dark Horse where his audience was clapping and praising the vaccine. Fauci was seen on CNN giving out false numbers from what turned out to be just a blog - no facts or science - just modelling, Until people wake up and realise what Pharma will do to keep the dollars rolling in then there is no hope. 40 years as a pharmacist showed me the power they have over people's minds.
1 0 • Reply • Share ›

Jerry Alatalo
7 days ago
It's worth repeating/emphasizing what Dr. Malhotra pointed out on the hugely important, profound difference between (intentionally deceptive) relative risk and (accurate) absolute risk.

"Relative risk reduction is a way of exaggerating the benefits of any intervention … which would be in the interest of people trying to sell you something — in this case, the pharmaceutical industry.

"So if, for example, you have 1,000 people in a trial that didn't have the vaccine versus 1,000 people that did in the placebo group … you may have two people dying. And in the intervention group, you may have just one person dying. And that's a reduction of 50%. One over two is a 50% relative risk reduction. But actually, you've only saved one life out of 1,000.

"So, the absolute risk reduction is only 1 in 1,000. It's a big difference. The guidance has been for many years that we must always use absolute risk reduction in conversations with patients, not just relative risk reduction alone; otherwise, it's considered unethical,' Malhotra said.

"The accusation is that governments acted on Pfizer's relative risk figure of 95% efficacy, when the absolute risk was a mere 0.84%. In other words, you'd have to vaccinate 119 people to prevent just one from catching COVID. ***'So we were basically sold on something that ultimately, and in retrospect now, was very, very misleading.'"***
2 0 • Reply • Share ›

Alan Sterry → Jerry Alatalo
6 days ago
This was highlighted by BMJ Dr. Peter Doshi at the start of the roll out. On it went and still does. Not even the deaths and damage seem to be able to stop this madness. They seem to be pushing it more and more so as to cover up the lies already told.
1 0 • Reply • Share ›

Tershia
8 days ago
This sounds all very well but imo it is not realistic, certainly not in a country like Canada. Here the head of the nasty snake is the prime minister whose government is still advertising to take the Covid jab from birth to death. Now it is the bivalent one being pushed to boot. I have no reason to trust any vaccine pointed at us after the first death jab. Injuries from Covid 19 are denied even though multiple young doctors have died unexpectedly in Ontario.
The unvaccinated are treated as the Jews were in Nazi Germany. Doctors who voiced doubts or concerns about the safety of the vaccine have been fired (this is socialist medicine!) and lost hospital privileges. Some are awaiting trail by the medical associations.
Too many doctors sided with the government mandates and became hostile towards patients who did not agree. I don't care why they did that, because the damage has been done and trust and respect has been lost. One medical friend refused to see his unvaccinated friends which included me, and my own GP was one of the hostile ones.
The PM is called a poster boy for the WEF and will do whatever is necessary to make money for them, at the expense of the well-being of the citizens. People are filled with fear and still wearing masks. Calling out the war measures act on peaceful protesters in Ottawa has only exacerbated what is a bad situation.
Canada has become a totalitarian state, all because of the government's need to please Big Pharma. I am sure there is monetary reward for Schwab's obedient lackeys.
I do respect Dr. Mercola's article, but the facts don't fit the reality where I live. I wish they did.
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Ektor57
8 days ago
Doctors have it made and do not want to know the truth since it might affect their incomes. They are lazy when it comes to increasing their knowledge of medicine.
1 0 • Reply • Share ›

H_mmm
6 days ago
"misinformed doctors and unwittingly harmed and misinformed patients" Wrong, the evidence is overwhelming, doctors and nurses knew exactly what they were doing. Plain and simple they showed a careless disregard for human life, engaged in targeted discrimination by refusing to treat the 'unvaxxed' and thus directly caused their deaths. In my opinion from this point forward no doctor or nurse, even Mercola, can be trusted ever again. We need Nuremburg 2 as the vast majority of 'medical' professionals were either incompetent or willfully engaged in crimes against humanity in collusion with corrupt politicians and pharma industry sociopaths. Enough is enough.
0 0 • Reply • Share ›

Shazza
7 days ago
Dr's get bonuses, overseas holidays etc from big pharma depending on how much of their drugs they push.
I don't see why these drug pushing doctors don't get jail time like other drug dealers.
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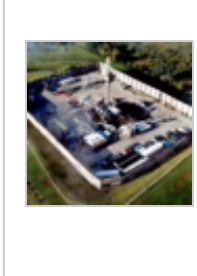
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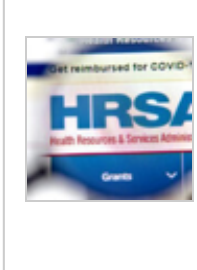
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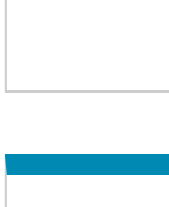
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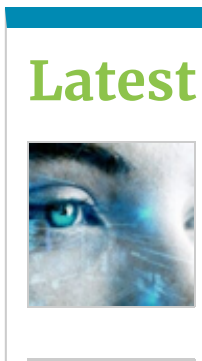
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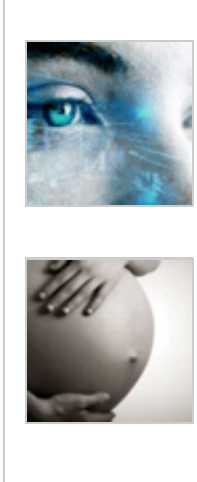
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